Image# 28991440056 07/45#2008 12:07

## **FEC FORM 5**

## REPORT OF INDEPENDENT EXPENDITURES MADE AND CONTRIBUTIONS RECEIVED

To Be Used by Persons (Other than Political Committees) including Qualified Nonprofit Corporations

(a) Name of Individual, Organization or Corporation	7			
NARAL Pro-Choice America				
10.11.1.2.1.10.01.00.00				
(b) Address (number and street)				
Suite 700 (c) City, State and ZIP Code				
	3. FEC Identification Number			
Washington DC 20005	<b>C</b> C90004185			
2. Corporate filers only  Is the filer a qualified nonprofit corporation?  X Yes No	300001100			
is the filer a qualified nonprofit corporation: La Yes   100				
Individual filers only Name of Employer	Occupation			
A TYPE OF PEROPE (I. I. I				
4. TYPE OF REPORT (check appropriate boxes):				
(a) April 15 Quarterly Report	r Notice			
☐ July 15 Quarterly Report				
October Quarterly Report				
☐ January 31 Year-End Report				
□ January S1 real-End Neport				
(b) Is this Report an amendment? Yes \( \subseteq \text{No } \( \text{X} \)				
5. COVERING PERIOD: FROM 07 / DD / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
THROUGH				
M M / D B / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y				
6. TOTAL CONTRIBUTIONS	0.00			
	010.75			
7. TOTAL INDEPENDENT EXPENDITURES	619.75			
Under penalty of perjury, I certify that the independent expenditures reported herein were not made with the cooperation or prior consent of, c request or suggestion of, a candidate or a candidate's agent or authorized committee or a political party committee or its agent. In addition, reported herein were made by a corporation, I certify that the corporation is a qualified nonprofit corporation under the Commission's regulati	if the independent expenditures			
TYPE OR PRINT NAME OF PERSON COMPLETING FORM SIGNATURE	DATE			
John Botts	07/15/0000			
	07/15/2008			
NOTE: Submission of false, erroneous or incomplete information may subject the person signing this report to the penalties of 2 U.S.C 437g.				

 $For \ further \ information, \ contact:$ 

Federal Election Commission, 999 E Street, N.W., Washington, D.C. 20463 Toll Free 800-424-9530, Local 202-694-1100

## SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES

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ITEMIZED INDEPENDENT EXPENDITURES

NAME OF FILER (In Full)

FOR LINE 7 FOR FORM 5

NARAL Pro-Choice America		
Full Name (Last, First, Middle Initial) of Payee		Date
NARAL Pro-Choice America		M M / D D / Y Y Y Y
Mailing Address 1156 15th Street, NW, Suite 700		Amount / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
City	tate Zip Code	3.75
	OC 20005	
Purpose of Expenditure	Category/	Office Sought: House State: DC
List Rental NM Town Hall	Type	Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Exp John McCain	penditure:	President
John McCan		Check One: Support X Oppose
Calendar Year-To-Date Per Election for Office Sought	170976.94	Disbursement For: X Primary General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		
Facebook		Date
Mailing Address		$\begin{array}{c ccccccccccccccccccccccccccccccccccc$
156 University Avenue		Amount
City	tate Zip Code	140.00
•	CA 94301	
Purpose of Expenditure	Category/	Office Sought: House State: DC
On-line Advertising	Type	Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Exp	penditure:	Y President
Barack Obama		Check One: X Support Oppose
Calendar Year-To-Date Per Election for Office Sought	170976.94	Disbursement For: X Primary General 2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee	l	Date
The Next Big Thing		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		0 / 1 5 2 0 0 8 Amount
2000 M Street, NW		150.00
	tate Zip Code OC 20036	150.00
Purpose of Expenditure	Category/	Office Sought: House State: DC
Phone Bank Expense	Type	Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Exp	penditure:	Y President District
John McCain		Check One: Support X Oppose
Calendar Year-To-Date Per Election	:	Disbursement For: X Primary General
for Office Sought	170976.94	Other (specify)
(a) SUBTOTAL of Itemized Independent Expenditures		293.75
(b) SUBTOTALof Unitemized Independent Expenditures		
(c) TOTAL Independent Expenditures		

Image# 28991440058 SCHEDULE 5-E ITEMIZED INDEPENDENT EXPENDITURES PAGE **3**/**3** FOR LINE 7 FOR FORM 5 NAME OF FILER (In Full) NARAL Pro-Choice America Full Name (Last, First, Middle Initial) of Payee Date The Next Big Thing 2008 Mailing Address Amount 2000 M Street, NW 150.00 State Zip Code Washington DC 20036

<u> </u>		
Purpose of Expenditure	Category/	Office Sought: House State: DC
Phone Bank Expense	Туре	Presidential Senate District: 00
Name of Federal Candidate Supported or Opposed by Expenditu	ure:	X President
Barack Obama		Check One: X Support Oppose
Calendar Year-To-Date Per Election		Disbursement For: X Primary General
for Office Sought	170976.94	Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Google		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
Mailing Address		
PO Box 39000		Amount
City State	Zip Code	88.00
San Francisco CA	94139-3181	
Purpose of Expenditure	Category/	Office Sought: House State: DC
Google Adwords (advertising)	Type	Presidential Senate
Name of Federal Candidate Supported or Opposed by Expenditu	ure:	President District: 00
Barack Obama		Check One: X Support Oppose
Odersky Very To Bate Ber Flori's		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	170976.94	2008 Other (specify)
Full Name (Last, First, Middle Initial) of Payee		Date
Google		M M / D D / Y Y Y Y
Mailing Address		M M / D D / Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y Y
PO Box 39000		Amount
City State	Zip Code	88.00
San Francisco CA	94139-3181	
Purpose of Expenditure	Category/	Office Sought: House State: DC
Google Adwords (advertising)	Type	Presidential Senate
Name of Federal Candidate Supported or Opposed by Expenditu	ure:	President District: 00
John McCain		Check One: Support X Oppose
		Disbursement For: X Primary General
Calendar Year-To-Date Per Election for Office Sought	170976.94	2008
Tor Office Sought		Other (specify)
(a) OURTOTAL (Userlandland 1.15 T. 15		326.00
(a) SUBTOTAL of Itemized Independent Expenditures		325,30
(b) SUBTOTALof Unitemized Independent Expenditures		
		010.75
(c) TOTAL Independent Expenditures		619.75
6021		FEC Schedule 5 ( Rev. 02/2003)